PTO/SB/17 (10-08) Approved for use through 06/30/2010. OMB 0651-0052

A Portor the Bone	Porty Poduction Act of	1005 no person are re	antired to	U.S. Patent	and Trademark	Office; U.S. DEP	ARTMENT O	F COMMERCE			
the Panawark Reduction Act of 1995, no person are required to				respond to a collection of information unless it displays a valid OMB control number Complete if Known							
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Application Number		10/553,478-Conf. #8905					
FEE TRANSMITTAL				Filing Date		October 17, 2005					
				First Named Inventor		Satoshi Watanabe					
For FY 2009				Examiner Name		A. B. Comley					
Applicant c	Applicant claims small entity status. See 37 CFR 1.27				37	3746					
TOTAL AMOUNT C	TOTAL AMOUNT OF PAYMENT (\$) 810,00				No. Of	OHK-0011					
METHOD OF PAYMENT (check all that apply)											
Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: 18-0013 Deposit Account Name: Rader, Fishman & Grauer PLLC											
l L '	ount Deposit Account	-	0013		·		nan & Gra	uer PLLC			
For the at	ove-identified depo	sit account, the D	irector is								
x Cha	rge fee(s) indicated	d below		Charg	e fee(s) indic	ated below, ex	cept for th	ne filing fee			
X Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17											
FEE CALCULA		TO AND T. IT									
	, SEARCH, AND E	XAMINATION FEI	FS			·					
1. BASIC FILING		LING FEES		ARCH FEES	EXAMINA	TION FEES					
	F 10	Small Entity	F (¢	Small Entity	Fee (\$)	Small Entity Fee (\$)	Foos F	Paid (\$)			
Application Typ		<u>Fee (\$)</u> 165	Fee (\$	<u>Fee (\$)</u> 270	220	110	1 003 1	<u>αια (ψ/</u>			
Utility	330		100	50	140	70					
Design	220	110		165	170	85					
Plant	220	110	330		650	325					
Reissue	330		540	270 0	0.00	0					
Provisional 220 110 0			U	U	U	U		Small Entity			
2. EXCESS CLAI	M FEES						Fee (\$)	Fee (\$)			
Fee Description	20 (including Reiss	sues)					52	26			
	t claim over 3 (incl						220	110			
Multiple depende		,					390	195			
Total Claims	· · ·			ee Paid (\$)	<u>Mu</u>	tiple Dependent Claims					
		x =			Fee	Fee (\$) Fee Paid (\$)					
HP = highest number	er of total claims paid fo	r, if greater than 20.						_			
Indep. Claims	Extra Claim	s Fee (\$)	F	ee Paid (\$)							
	or HP =	_ x =									
	er of independent claim	s paid for, if greater tha	an 3.								
3. APPLICATION	SIZE FEE		of noner	(avaluding elect	ronically file	d sequence or	computer				
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50											
sheets or frag	ction thereof. See	35 U.S.C. 41(a)(1))(G) and	37 CFR 1.16(s)		•					
Total Sheets				dditional 50 or fra		Fee (\$)	Fee	Paid (\$)			
	- 100 =			(round up to a wh	ole number) x		=				
4. OTHER FEE(S) Fees Paid (\$)											
Non-English Specification, \$130 fee (no small entity discount)											
Other (e.g., late filing surpharge): 1801 Request for continued examination (RCE) (see 37 810.00											
SUBMITTED BY											
Signature	ail St_	Registration No. (Attorney/Agent) 29,211 Telephone (202) 955-3			55-3750						
Name (Print/Type)	Carl Scha ukowit	ch				Date S	Septembe	r 18, 2009			

PTO/SB/17 (10-08)
Approved for use through 06/30/2010. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE to a collection of information unless it displays a valid OMB control number

W/ 8 TW	ork Reduction Act of	1995, no person are r	equired to	Complete if Known							
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).						10/553,478-Conf. #8905					
FEE	Filing Date		October 17, 2005								
FEE	First Named Inventor		Satoshi Watanabe								
	Examiner Name		A. B. Comley								
Applicant c	Art Unit 37		3746								
TOTAL AMOUNT OF PAYMENT (\$) 810.00				Attorney Docket	No.	OHK-0011					
METHOD OF PAYMENT (check all that apply)											
Check Credit Card Money Order None Other (please identify):											
x Deposit Account Deposit Account Number: 18-0013 Deposit Account Name: Rader, Fishman & Grauer PLLC											
For the al	oove-identified depo	sit account, the D	irector is					1			
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) X Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee											
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17											
FEE CALCUL											
1. BASIC FILING	, SEARCH, AND E										
Application Type		LING FEES Small Entity Fee (\$)	SE <u>Fee (</u>	ARCH FEES Small Entity Fee (\$)	EXAMII Fee (\$)		Fees Paid (\$)				
Utility	330	165	540	270	220	110					
Design	220	110	100	50	140	70					
Plant	220	110	330	165	170	85					
Reissue	330	165	540	270	650	325					
Provisional	220	110	0	0	0	0					
2. EXCESS CLA	IM FEES						,	Small Entity			
Fee Description											
	20 (including Reis at claim over 3 (inc						220	110			
		idding Reissdes/					390	195			
Multiple dependent claims				ee Paid (\$)	ı	Multiple Depend	lent Claims				
	Total Claims Extra Claims Fee (\$) Fee Paid (\$)					Fee (\$) Fee Paid (\$)					
	er of total claims paid fo							_			
Indep. Claims	Extra Clain		Fee Paid (\$)								
- or HP = x =											
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).											
Total Sheets	Extra She	ets <u>Numbe</u>	r of each	additional 50 or fra	action there		<u>Fee</u>	Paid (\$)			
- 100 = /50 = (round up to a whole number) x =											
4. OTHER FEE(S)											
Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surpharge): 1801 Request for continued examination (RCE) (see 37 810.00											
Other (e.g., late tiling survivarge). Too I request for continued examination (102) (555 5											
SUBMITTED BY Registration No. 29,211 Telephone (202) 955-3750											
Signature (Attorney/Agent) 29,211											
Name (Print/Type)	Sarl Scha ukowi	tch				Date	Sehrenine	10, 2003			